

CRS Parent Connection

Alabama Department of Rehabilitation Services

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Spring 2005

Vonda Reeves, CRS Parent Consultant

Hello, I'm Vonda Reeves, parent consultant with Children's Rehabilitation Service in Dothan. I have been serving in this position for seven and a half years.

My journey started 16 years ago when God blessed me with a 2 pound, 3 ounce baby boy, born three months premature. Our son was diagnosed with mild cerebral palsy (CP) at 18 months of age. Having CP was challenging within itself, but living in a rural community with limited services, was an even bigger challenge.

Another parent of a child with special health care needs and I began to share information with each other. She told me about Project P.E.E.K. (Preschool Education for Exceptional Kids) sponsored by the Arc of Barbour County.

In addition to serving as a parent consultant, I have served on the governor's Interagency Coordinating



Council (ICC) and the Alabama Developmental Disability Planning Council. I'm a 1993 graduate of PIPA (Partners in Policymaking of Alabama). The training I received at PIPA gave me the leadership skills I needed to start a parent support group.

I thoroughly enjoy my role at CRS, providing support to families of children with special health care needs. I am available to attend IEP meetings, make home and school visits, and educate families about their children's special health care needs. You are welcome to visit the family resource library in our newly renovated building at 795 Ross Clark Circle in Dothan.



I am here to support you. I can be reached at 1-800-677-9123 or 334-795-0022 or by e-mail at vreeves@rehab.state.al.us.

Vonda Reeves CRS Parent Consultant.



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CRS Parent Connection

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Parent Connection is a complimentary newsletter published by Children's Rehabilitation Service for families of children with special health care needs. The goal of this newsletter is to increase communication and share information about children with special health care needs and their families. The newsletter reflects a family-centered theme throughout and serves as a forum for family members to share information, thoughts, feelings, concerns, etc. Nothing printed or implied in this publication constitutes an endorsement by the Alabama Department of Rehabilitation Services.

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From The Director's Chair



Greetings Everyone!

I hope this newsletter finds you and your families doing well. We at CRS are working hard to do our best to manage this year's funding shortfall and service reductions. The last few months at CRS have been stressful as we are well aware that service reductions have a negative impact on the children and families we serve

I mentioned in the last newsletter that ADRS and CRS requested budget year 2006 increases for both the Children with Special Health Care Needs and Hemophilia Programs. We have tried our best to clearly communicate to everyone the urgent need for additional funds in order to have any chance of reinstating any of the current service cuts. The possibility of additional service cuts is even more frightening. As I write this article, the only Education Trust Fund budget that has been submitted is Governor Riley's, which while containing additional funds for CRS, falls far below the amount needed to even begin to consider reinstating any of this year's service cuts. We are now anxiously awaiting the proposed budget from the legislature.

If you believe that CRS provides critical and valuable services to families in this state, we would be grateful if you would talk to your local legislators and express your support for fully funding the budget increases requested by Alabama Department of Rehabilitation Services, *especially CRS*. I am hopeful that the needs of the families we serve do not get lost in all the controversy and debate over what services are paid for out of the General Fund or the Education Trust Fund monies.

I want to personally THANK YOU for your support of the Alabama Department of Rehabilitation Services and CRS.

TOGETHER WE CAN MAKE A DIFFERENCE!

Cary Boswell Assistant Commissioner

Maternal and Child Health Annual Block Grant and Five-Year Needs Assessment

Julie Preskitt, MS, OT, MPH
MCH/OT program specialist, Children's Rehabilitation Service
(Adapted from a Family Voices article)

Each year, states apply to the federal Maternal and Child Health Bureau (MCHB) for Title V MCH Block Grant funds. These funds are provided through Title V of the Social Security Act and must be matched by states. States use these funds to carry out programs and to develop policies to improve the health of women and children, including children and youth with special health needs. To make sure that State Title V Programs are responding to needs identified in communities, each State Title V Program is required to complete a needs assessment every five years.

A needs assessment is a study of the service systems in a state. Specifically, it answers questions about the provision of health services (what strengths are already in the state, and what are the gaps in services). A needs assessment is a never-ending cycle as needs are ongoing and constantly changing. Reports of the needs assessment will be submitted to MCHB as part of each state's Block Grant Application, with the next report due in July 2005. Data gathered assists the state in reporting on national and state performance measures and guides it in setting priorities and planning programs to meet the identified needs.

Children's Rehabilitation Service (CRS)

partners with the Alabama Department of Public Health to



complete the Title V MCH Block Grant Application and the Five-Year Needs Assessment for Alabama. CRS is specifically responsible for portions related to children and youth with special health care needs.

For this needs assessment cycle, CRS worked with the Maternal and Child Health Department at the UAB School of Public Health and with Family Voices to conduct open family forums and one youth forum throughout the state. These open forums were held in Huntsville. Gadsden, Birmingham, Demopolis, Opelika, Dothan, and Mobile. One additional forum in Birmingham was conducted in Spanish. A forum for youth with special needs was held in Birmingham on a Saturday. Although Hurricane Ivan blew through the state and may have reduced attendance, 83 people participated in one of these forums between August and October of last year. A final report from the open forums (family and youth) will be available soon and will be mailed directly to anyone who participated and requested a final copy.

CRS also used a survey for providers to gather information on a county level about resources and barriers to receiving care. A youth survey was available in CRS clinics and several other sites and was also mailed to a group of youth with special needs. We were pleased that 229 youth ages 12 to 21 years completed a survey.

CRS is in the final stages of analyzing all the information collected for the needs assessment. Some of the issues found were similar to issues from the past, including transportation barriers, lack of recreational activities, and inadequate distribution of specialized providers for children and youth with special health care needs. Cultural/language barriers and transition-related issues for youth were described more often this time than in the past. Based on the new information, CRS has chosen the following three priority needs for the program:

- Improve health status of children and youth with special health care needs through increased access to comprehensive, quality primary and specialty care, and allied health and other related services (improve health status through increased access to care).
- 2) Improve the capacity of children and youth with special health care needs to be fully integrated into their communities to live, learn, work, and play (community integration).
- 3) Strengthen systems of family and youth support to enable children and youth with special health care needs and their families to participate more fully in program and policy development, to identify resources, and to benefit from the services they receive (strengthen youth and family supports).

We feel that these priority needs are broad enough to allow the program to

focus on a wide variety of activities that will be important for the system of care for children and youth with special health care needs and their families.



Overall reports for each state are available through the MCHB website (www.mchb.hrsa.gov). The updated report for Alabama, including the MCH Block Grant and Five-Year Needs Assessment, will be posted in the fall. If you have any questions about the portions of the MCH Block Grant or Five-Year Needs Assessment related to children and youth with special health care needs, please call Julie Preskitt at 1-800-441-7607.

FAMILY VOICES

Quality Health Care for Children with Special Health Care Needs

In our last issue of the *Parent Connection* we reviewed the first three of six principles of quality health care for children with special needs, as identified by Family Voices.

The principles previously reviewed were:

- Quality health care...is family centered
- Quality health care...gives every child access to primary and specialty care
- Quality health care...includes flexible, family-centered health benefits.

In this issue we will discuss the last three principles.

In a quality health care system...

Quality health care...builds on strong family-professional partnerships:

- Families and providers make decisions together, with the child participating as much as possible.
- Administrative policies and practices support long-term relationships between families and providers.
- Families help professionals develop and use tools that measure quality of care and family satisfaction.
- Families participate in inservice trainings with providers, agencies and health plans.
- Families serve on statewide and local public and private policymaking boards.

Quality health care...is costeffective:

- Public and private policies assure that families can afford their child's health care
- Families are assisted in understanding and utilizing all payment options.
- Families have roles in making cost decisions, including vendor selection.
- Payors compare hospitalizations or other expensive treatments to alternatives, such as out-of-network services that might cost less or produce a better outcome at almost the same price.



- The insurance plan monitors overall costs to the family, including out-of-pocket expenses.
- All payors communicate to make sure that payments are made on time.
- Family leaders help set capitation rates that cover real costs for children with special health care needs.

- Real costs are tracked to assure that our children receive necessary benefits.
- Families serve on commissions reviewing expenditures for children with special health care needs.
- When a family exceeds a lifetime cap, the insurance provider either offers a new plan with comparable benefits or transfers the child to a new plan with comparable benefits, with no interruption in coverage, medical home or access to specialists.
- Care coordinators understand the range of services and communicate with one another and the family.
- Health services are coordinated with other services important to the child and family.
- Health care sites are accessible, providing translation services and family-friendly information.

Quality health care...supports families as caregivers:

- Families receive information about their child's diagnosis, services, expected outcomes, ways to pay, and their rights and responsibilities.
- Families can easily access medical records and other important information and documents.

(Continued on page 5)

Medical Home Update

In late January, the Medicaid Agency sent all Patient First primary care providers an interactive educational program on cd-rom (disk) about providing a medical home for their patients. Several of our families and physicians participated in the development of the material and Family Voices is listed as a resource.

The Patient First program includes incentives for primary care physicians to listen to the educational program and to provide certain



medical home services to families. Most of the incentives are for services that can be identified through records or billings.

We are very proud of Medicaid for supporting medical homes and providing the incentives for physicians to provide these services. We also know that true medical homes require ongoing partnerships between families and providers. We see this educational program as a great step forward.

Ask your physician if he has had time to complete the program and what he thought about it. Don't hesitate to share with him/her what issues are of most importance to you.

Dr. Mary Ann Pass CRS Medical Consultant (Quality Health Care continued from page 4)

- Information is communicated in family-friendly language and formats.
- Families are full members of health care teams, participating in all decisions.
- The plan of care supports the direct care given by families and describes the child's role in self-care.
- Providers and health systems give families and children opportunities to comment on care they receive.
- The plan of care includes assistance in the transition from pediatric to adult health services.

Maybe yours.

Emergency Patient Information

Storing Emergency Patient Information Online

Blue Cross and Blue Shield of Alabama is now offering a free service which allows you to store emergency contacts and other essential information online. You may enter information for yourself and your family, and make it available to doctors or rescue personnel in an emergency.

To register for EPI (Emergency Patient Information), go to www.myepi.net and select "Register for EPI." You will create your user ID and password, and then complete the emergency information needed. You then print your EPI summary and EPI identification card for your immediate use, and order permanent EPI cards for you and your family. Emergency personnel will use the Rescue Login Number from your card to view your information in case of an emergency. The Rescue Login Number on the card gives access to view the information, but only you with your User ID and password can make changes to your information.

Please add me to your newsletter mailing list.	
Name:	
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Clip & mail to:	
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For information about Family Voices, please contact the Alabama state coordinators Susan Colburn (334-613-2884, scolburn @rehab.state.al.us) or Jerry Oveson (251-438-1609, oveson@bellsouth.net).



Let's YAC About It

From the Pen of the Youth Consultant

Hi! I am so excited to be writing to you again! I have just a couple of things to share with you this time. On February 9-13, 2005, I attended a KASA Advisory Board meeting in Washington, D.C., as part of the Family Voices National Conference. While in D.C. I had the opportunity to take part in Capitol Hill visits; however, representatives from our state were not available to meet with me.

Also, on February 22, I traveled to Andalusia to speak briefly to the CRS Parent Advisory Committee there. I had the chance to speak on behalf of youth about transition. I shared some of my experiences with them, and Mrs. Linda Graham and I provided resources for the committee.

Well, I know this seems short, I will have more to share with you next time.

Jennifer Thomas
CRS State Youth Consultant

Youth Advisory Committee

The Youth Advisory Committee has packed up and taken its show on the road! On March 8, 2005, the committee presented at the Alabama Transition Conference. The title of the presentation was "What Does Health Have to do With Transition?" The members spoke about the following topics: adult health care, presented by Ryan Colburn; education, presented by Brinkley Fuller and Brent Holland;

recreation, presented by Jicoria Robinson; and transportation, presented by Stacy Brock.

The YAC did a wonderful job! Each person wrote his or her own speech, sharing personal experiences about the topic chosen.

Keep looking for more great things about the YAC!



The youth advisory committee speaking at the Transition Conference.

For more information about the Let's YAC About It section of this newsletter, please contact Jennifer Thomas, CRS state youth consultant, at jthomas@rehab.state.al.us or Linda Graham, state youth coordinator, at lgraham@rehab.state.al.us. You may also reach either of them at 1-800-441-7607.

YLF News

The YLF application deadline for 2005 has now passed. For more information about YLF, please visit www.rehab.state.al.us/YLF.

YAC... YAC... YAC...



Resources Resources



Sail to independence! The State of Alabama Independent Living Service (SAIL) is a division of the Alabama Department of Rehabilitation Services that provides specialized in-home counseling, attendant care, training and medical services to Alabamians with severe disabilities.

SAIL ensures the consumer can live as independently as possible at home and in the community through four specialized programs.

SAIL Waiver

Eligibility:

- Must be an Alabama resident
- Be a non-resident of a nursing home, group home or assisted living facility
- Be at least 18 years of age
- Be financially eligible
- Must meet the nursing home level of care (or at risk of nursing home placement without receipt of in-home services)

Services provided are case management, personal care, personal assistant services (for those who are employed), assistive technology (specialized power chairs, hospital beds, etc), environmental accessibility adaptations (ramps, widening doors to accommodate wheelchairs), personal emergency response and medical supplies.

Technology Assistance Waiver (TAW)

SAIL case managers provide targeted case management for this highly specialized waiver. The TAW waiver is

operated by the Alabama Medicaid Agency.

Eligibility:

- Must be an Alabama resident
- Be a non-resident of a nursing home, group home or assisted living facility
- Must have received private duty nursing under Medicaid (Early Periodic Screening Diagnosis treatment) before turning 21
- Be financially eligible
- Must meet the nursing home level of care (or at risk of nursing home placement without receipt of in-home services)

Services available are targeted case management, personal care, personal assistant services (for those who are employed), assistive technology, environmental accessibility adaptations and medical supplies.

SAIL Homebound

Eligibility:

- Must be an Alabama resident
- Be a non-resident of a nursing home, group home or assisted living facility
- Must require services to remain at home rather than becoming institutionalized
- Must have insufficient income to pay for requested services
- Be at least 16 years of age
- Must have acquired a traumatic brain or spinal cord injury resulting in quadriplegia
- Must depend on another individual for six of eight of the

following activities of daily living: bathing, dressing, transferring from bed to chair, taking medications, checking skin integrity, preparing meals, feeding, bowel and/or bladder therapy.

Services provided are counseling and guidance, nursing management, attendant care, durable medical equipment, medication/medical supplies, van modification and home modification.

SAIL Independent Living Services

Eligibility:

- Must have a severe disability
- Must be expected to benefit from srvices in terms of becoming independent at home or at work
- Must be an Alabama resident

Services provided are advocacy, peer support, information and referral, and independent living skills training.

Links to Independent Living Centers

- Birmingham Independent Living Center www.birminghamilc.org
- Mobile Independent Living Center <u>www.ilcmobile.org</u>
- Montgomery Independent Living Center www.mcil@bellsouth.net





Taking a Trip With Your Child With Disabilities

by Jodi Legge Pacesetter, Summer 2004 Reprinted with permission from PACER Center, (952) 838-9000

Traveling with children with disabilities may require more than the usual amount of planning, but if the family prepares, the trip can run smoothly for everyone.

If your child has a disability, planning ahead to meet his or her special needs is essential, say parents and others.

A general rule of thumb:

- Check with your child's doctor or with your child's specific disability organization for recommendations on medical services enroute. For disability organizations, visit "Links" on PACER's website at www.pacer.org.
- Make sure your child is wearing identification that includes your cell phone number.
- Carry prescription medications in two separate bottles
 (if one bottle is lost, there is a backup). Pack the bottles in separate places. Make sure the medications will not be affected by sun, heat or altitude.

Flying to your destination:

- Make reservations as early as possible and find out about the airline's accessible services. Most airlines have information available on their websites.
- Remember, you can ask for and receive a private security screening.

 Contact the airline in advance if you will need a representative to accompany you to the gate.

If your child uses a wheelchair:

- Ask if the wheelchair can be carried onto the plane versus being checked.
- Measure the wheelchair to make sure it fits in the aisle of the plane.
- If using a power wheelchair, learn the airline regulations regarding use/type of batteries.
- Service the wheelchair before the trip. Change tires if needed and bring along tools for potential repairs.

Medications or medical equipment:

- Carry the medication with you in your carry-on luggage.
- Most aircraft do not have refrigerators on board, so plan accordingly.
- Carry duplicate medical records or letters from physicians if your child has a rare condition.
- If your child has implanted metal or needs to carry medical



equipment, such as syringes, carry the appropriate documentation (doctor's prescription) for security.

- Check with the airlines to find out the policy regarding service animals.
- The U.S. Department of Transportation has established a toll-free hotline to

assist travelers with disabilities. General information about rights or problems can be addressed by calling 1-800-788-4838 or 1-800-455-9880 (TTY). The line is staffed from 7:00 a.m. to 11:00 p.m. eastern time, seven days a week.

Staying in a hotel or motel:

- Call the property directly to find out if it is handicapped accessible or has florescent lighting or other features that could affect your child's disability. Do not rely on the central reservation service.
 Often they are not located in the city that you will be visiting and have never seen the property.
- If your child has difficulty with mobility, ask the hotel or motel specific questions about accessibility:
- How far from the entrance is the handicapped parking? Does the entrance have steps?
- ✓ Are the doors to the room wide enough to accommodate a wheelchair?
- ✓ Is the pool and other recreational facilities at the hotel accessible, and if so, how?

 Does the pool have a wheelchair lift?
- ✓ If there is a restaurant on the premises, is it accessible?
- ✓ If you have difficulty obtaining the information you need, ask to speak with engineering services or housekeeping. They usually know a great deal about the room set-up. If all else fails, ask to speak to the general manager.

(Continued on page 9)

A Winning Smile

Rhonda Orr-Burke enjoys entering beauty pageants. She participates in the Retired Volunteer Programs Pageants twice a year and has won the "Prettiest Smile" trophy three times.

Not only is she a winner in beauty pageants, she is a winner in school. Rhonda is eleven years old and in the fourth grade at Ohatchee Elementary School in Calhoun County. Last year, she had the highest Accelerated Reading score in her class. She is in the Principal's Club and on the "A" Honor Roll! In her spare time, she enjoys reading western and humorous fiction, shopping at Claire's and McRae's, eating at the Cracker Barrel and Outback restaurants, and watching Disney movies with Disney World being her favorite vacation place. Rhonda attends Hillcrest Baptist Church in Anniston.

Rhonda has moderate to severe Cerebral Palsy, is non-ambulatory and uses a manual wheelchair. She



practices gait training at home, with physical and speech therapy at UAB Sparks Clinic where Rhonda was one of the 2003 UAB Civitan International Sparks Clinic Star Children. She is non-verbal, but uses an augmentative communication device for speech assistance by pushing her left cheek against a switch that operates the

equipment. She can verbalize most first names of her classmates and teachers.

Randy and Tracy Burke adopted Rhonda four years ago. Rhonda has a brother, Nathan and a sister, Gracie. Tracy is a member of the Anniston CRS local parent advisory committee and the CRS state parent advisory committee. She says Rhonda is her sunshine and has made great strides by transferring from Calhoun County's multi-handicapped unit to a regular class with her peers at her current school. Tracy has worked diligently with Rhonda's school and teachers to explain how Rhonda can be educated. This is evident in Rhonda's accomplishments.

Rhonda's constant smile reflects her happiness. Tracy and Rhonda are thankful for the services they receive at CRS and appreciate their CRS social worker, Julie Nix. They say, "Julie gets the job done and is GOOD!".

Submitted by Sandra Hazzard, CRS Parent Consultant

(Taking a Trip continued from page 8)

✓ Once you are satisfied that the hotel or motel will provide the facilities and services you need, guarantee your room with a credit card.

Visiting attractions:

- Check ahead to learn about accessibility and make sure the services your child needs are available.
- Anticipate delays and long lines. Carry medications with you; plan distractions while waiting (play simple games or bring toys). Give children a disposable camera so they can take photos from their own perspective.

 Remember most parks will not assist in the transfer of a child with physical disabilities to a ride for liability reasons. Parents must assume responsibility for transferring their children to and from rides/attractions.

Make sure to allow plenty of time for adequate rest:

- If your child is a challenged sleeper, consider whether it is worthwhile to arrange for a separate sleeping space.
- Bring pillows, sheets and other "comfort items" from home to help bedtime go well.

 Provide plenty of extra water. Children sitting for a long time in car seats and wheelchairs often perspire a lot and need to remain hydrated.

Practice by going on short trips.

This is especially important if your child has a behavioral challenge. Plan ahead for "meltdowns" or "tantrums," using positive interventions. Practice the strategies on the mini-trips to see if they will work on longer travel or vacation.

Relax!

With careful preparation, specific to your child's need, your travel can be filled with positive experiences for the entire family.



Family Resources

Check out these websites:

NIDA for Teens

This interactive website about how drugs affect the brain and the body is geared to adolescents ages 11-15. The site includes facts, real life stories, games and a question and answer section. For more information go to www.teens.drugabuse.gov.

Nutrition Cafe

Interactive games and a wealth of information and nutrition facts are found at www.exhibits.pacsci.org/nutrition/.

Development and Behavior

Developmental-Behavioral Pediatrics online offers articles, tip sheets, current news and useful links about children's emotional development and behavior. www.dbpeds.org

Making Your Case

"Making Your Case" is a free, internet-based learning program developed by the Minnesota Council on Developmental Disabilities. It is designed for use by people with disabilities, family members and others who want to learn effective advocacy methods. Participants of this free learning program will be better able to:

- Effectively tell their story to policymakers
- Identify which policymakers would be most helpful in bringing about positive change
- Write effective letters and e-mails
- Conduct productive meetings with policymakers
- Give effective testimony and answers to questions
- Organize with others to address important issues

Access the program anytime at www.partnersinpolicymaking.com/makingyourcase/. This self-paced program takes about three hours to complete, and is available 24 hours a day, seven days a week.

Mark Your Calendar and Join Us for

"Traveling Together on **Highway 2010-Creating Healthy Tomorrows for** Children and Youth with **Special Health Care Needs**" July 14-15, 2005 **Sheraton Birmingham Hotel**

As you have read in previous editions of the Parent Connection Newsletter,

partners in our state have been working on activities to achieve the six national goals for children with special health care needs, that have been detailed in President Bush's New Freedom Initiative.



These goals are:

- 1. Families of children with special health care needs will partner in decision making at all levels and will be satisfied with the services they receive.
- 2. All children will be screened early and continuously for special health care needs.
- 3. All families of children with special health care needs will have adequate private and/or public insurance to pay for the services they need.
- 4. All children with special health care needs will receive coordinated, ongoing, comprehensive care within a medical home.
- 5. Community-based service systems will be organized so families can use them easily.
- 6. All youth with special health care needs will receive the services necessary to make transitions to all aspects

of adult life, including adult health care, work and independence.

Families, youth and professionals from many state and private agencies are serving on workgroups for each of these goals. Now, CRS has received a grant to hold a 2 day conference to reenergize those of us already involved in this effort and to recruit new partners to join us. Speakers will present information related to each of the 2010 goals, and the conference will conclude with an opportunity for each group to meet and plan future activities. If you are interested in coming to the conference and/or becoming involved in one of the six workgroups, please contact Susan Colburn at 1-800-846-3697. Parent/ youth scholarships will be available on a first-come, first-served basis. We look forward to seeing many of you there.

Parents and Kids



Smart Ways to Help Children Learn

Few parents might imagine that when their baby first opens his eyes, he is actually preparing for his first day of school. Research shows that children are born ready to learn and are naturally curious beings motivated to make sense of the world around them. In fact, the brain is the only organ that is not fully formed at birth.

Children learn best through their everyday experiences with the people they love and when the learning is fun, according to Zero to Three. Zero to Three offers suggestions for helping children develop skills to become eager learners:

Language and Literacy Skills

Language provides the foundation for the development of literacy skills.

- Talk together. Copy your baby's sounds and encourage her to imitate you. Point out and name the things you see together.
- Read books. It's never too early to start sharing books. Let him explore in whatever way he likes-even if

it's chewing on them or holding them upside down! Let your child hold the book and point to the pictures as you read.

Thinking Skills

Children are born eager to understand how the world works.

- Encourage your child to explore objects and toys in different ways. Touching, banging and shaking help children learn about how things
- Incorporate math games into your everyday routines. Count stairs as you climb them. Ask if there are enough crackers for everyone.

Self-Control

Self-control is the ability to express and manage emotions in appropriate ways. It is essential for school success and healthy development overall.

• Teach acceptable behaviors. Tell and show your child what he can do, not just what he cannot do. For example, tell him balls can be thrown outside but not inside.

• Give choices. Present him with acceptable options and let him choose. If a decision is really yours, don't offer a choice. Say, "It's bed time," not "Are you ready to go to bed?"

Self-Confidence

When children feel competent and believe in themselves, they are more willing to take on new challenges.

- Establish routines with your child. Most children feel safe and in control of their world when events are predictable.
- Let your child be the problem-solver. Give your child the support needed to solve a problem but don't solve it for your child.

More Information

Zero to Three is a nonprofit organization that promotes the healthy development of babies and toddlers. With funding from MetLife Foundation, the group has developed a booklet for parents called Getting Ready for School Begins at Birth. To download a copy or for additional information, visit www.zerotothree.org.

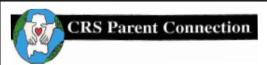
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May 1-8, 2005

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JOIN PARENT TO PARENT TODAY!!! All you have to do is fill out a form about your family and your child with special needs. You are then matched with a parent who is in a similar situation. You and your "match" can then talk on the phone and/or meet in person to provide support and information. See your parent consultant to sign up.



Cover the Uninsured Week — For information about the issues and activities planned, visit

	the website at <u>www.covertheuninsuredweek.org</u> .
July 14-15, 2005	Traveling Together on Highway 2010 - Creating Healthy Tomorrows for Children and Youth with Special Health Care Needs; Sheraton Birmingham Hotel; Birmingham, AL; Parent/youth scholarships available ; Contact: Susan Colburn; 1-800-846-3697
July 24-27, 2005	2005 Annual National Conference of the Association for Persons in Supported Employ ment; Riverview Plaza Hotel and Mobile Convention Center; Mobile, AL — For more information go to www.apse.org .
November 14-16, 2005	Alabama Early Intervention and Preschool Conference; Sheraton Birmingham Hotel; Birmingham, AL; Contact: Jeri Jackson, <u>JBH50@aol.com</u>